FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burde	en
l	hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					_			,			1		-								
1. Name and Address of Reporting Person*  KING DICHARD C							2. Issuer Name and Ticker or Trading Symbol M&T BANK CORP [ MTB ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
KING RICHARD G							[ 1112 ]								Direct	or		10% O	wner		
(Last) (First) (Middle) 900 HIGH STREET							3. Date of Earliest Transaction (Month/Day/Year) 10/01/2015									Officer (give title below)			specify		
							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)							4. II Americinent, Date of Original Filed (Month/Day/Year)									Line)					
HANOVER PA 17331-1639														X Form filed by One Reporting Person							
				-									Form Perso		re tha	n One Repo	orting				
(City) (State) (Zip)																					
		Tab	le I - No	n-Deriv	/ative	e Sec	curiti	es Ac	quired	, Dis	posed	of, or Be	enefic	ially	Owne	d					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			3. Transa Code (			ities Acquir d Of (D) (Ins		and 5)   Securit Benefic		ies ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							v	Amount	(A) or (D)	Price	)	Transa	nsaction(s) str. 3 and 4)			(501 4)					
Common	Stock	/2015	2015		A <sup>(1)</sup>		146	.6 A \$1		1.95	19	19,648		D							
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transa Code ( 8)		ion of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)		Own Forr Dire or In (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amour or Number of Shares	er							
Phantom Stock Units	(2)								(2)		(2)	Common Stock	(2)			3,447 <sup>(3)</sup>	)	D			

## **Explanation of Responses:**

- 1. This transaction represents stock received by the reporting person in lieu of cash fees pursuant to the M&T Bank Corporation 2008 Directors' Stock Plan.
- 2. The reported phantom stock units resulted from the conversion of existing phantom stock units received by the reporting person under a director fee plan maintained by Keystone Financial, Inc., which was acquired by M&T Bank Corporation on October 6, 2000, and represent a like number of shares of M&T Bank Corporation common stock. The phantom stock units may be settled in shares of M&T Bank Corporation common stock or cash upon a distribution in accordance with the terms of the plan. The reported phantom stock units also include units acquired through the reporting person's participation in the dividend reinvestment feature of the plan.
- 3. The information reported is as of September 30, 2015.

## Remarks:

By: Karla Braun-Kolbe, Esq. (Attorney-In-Fact)

10/05/2015

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.